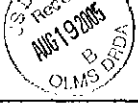


FORM LM-30
LABOR ORGANIZATION OFFICER AND
EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>00018</u> <u>10007</u>	2. Fiscal Year Covered From: <u>1 / 1 / 2004</u> Through: <u>12 / 31 / 2004</u>
3. Name and address of person filing. Name <u>KENNETH L. CUSICK</u> P.O. Box, Bldg., Room No., if any Street <u>322 W 1st St. 4th Floor</u> City <u>DULUTH</u> State <u>MN</u> ZIP Code + 4 <u>55802</u>	4. Name, file number, and address of labor organization. Name <u>CWA LOCAL 7214</u> Labor Organization File Number <u>024003</u> P.O. Box, Building and Room Number, if any Street <u>322 W 1st St. 4th Floor</u> City <u>DULUTH</u> State <u>MN</u> ZIP Code + 4 <u>55802</u>
5. Position in labor organization.	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests
(except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>QWEST COMMUNICATIONS</u> Trade Name, if any: P.O. Box, Bldg., Room No., if any Street <u>1801 CALIFORNIA ST.</u> City <u>DENVER</u> State <u>CO</u> ZIP Code + 4 <u>80222-1984</u>	7.a. Nature of Interest, Transaction, or Income. <u>INCOME EXP FROM QWEST</u> 7.b. Amount. <u>SEE ATTACHMENT</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>[Signature]</u>	On <u>8/10/05</u> <u>218 723-4225</u> Date Telephone Number

Name of Person Filing	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p>
	<p>11.b. Approximate dollar value of such dealing.</p>
	<p>12.a. Nature of interest held or income received.</p>
	<p>12.b. Amount.</p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p>

PART A ATTACHMENT

Kenneth L. Cusick
Executive Vice President CWA Local 7214
322 West 1st Street
Floor 4
Duluth, Mn 55802

Fiscal year 1-1-04 - 12-31-04
File number 00018
Tn (218) 723-4225

March 2nd., 2004

John Stanoch mtg in Mpls.

Mileage \$ 117.00

April 19th. & 20th., 2004

Agent Services mtg in Mpls.

Mileage \$ 117.75
Hotel \$ 90.00
Per Diem \$ 32.00

April 29th., 2004

Pathways Spring mtg.

Mileage \$ 120.00

October 7th., 2004

Pathways Fall mtg.

Mileage \$ 112.50